| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | Application or Docket Number 10-580090 TITY OTHER THAN OR SMALL ENTITY | | | |
|--|--|---|--------------|--|--------------------|--------------|-------|---|----|--------------------------|------------------------|
| | | | | | | | | | | | |
| BASIC FEE | | | | | · . | BASIC F | EE | | OF | BASIC FEE | 3/11/ |
| EXAMINATION FEE | | | | | | EXAM. F | EE | | - | EXAM. FEE | 2016 |
| SEARCH FEE | | | | . | | SEARCH | FEE | , | 1 | SEARCH FEE | |
| FEE FOR EXTRA SPEC. PGS. | | | mi | nus 100 = | / 50 = | X \$ 1 | 25 = | | 1 | X \$ 250 = | <u> 1 mu</u> |
| TOTAL CHARGEABLE CLAIMS | | | 40 " | ninus 20 = * | <u>-</u> | X \$ 2 | 5 = | · . | OR | <u> </u> | |
| INDEPENDENT CLAIMS | | | 9 | minus 3 = * | | X \$ 1 | 00 = | | OR | | - |
| MUL | TIPLE DEPEN | DENT CLAIM PF | RESENT | —————————————————————————————————————— | | + \$ 18 | 30 = | | OR | + \$ 360 = | - |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | TOT. | AL. | | OR | TOTAL | |
| AMENDMENTA | (| (Column 1) CLAIMS REMAINING AFTER AMENDMENT | AMENDE | Column 2 (Column 2 HIGHEST NUMBER PREVIOUSL PAID FOR | PRESENT EXTRA | SMA RAT | LL EN | ADDI- TIONAL FEE | OR | OTHER SMALL E RATE | |
| | Total | * | Minus | ** | = . | X \$ 2 | 5 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | = | X \$ 10 | 0 = | | OR | X \$ 200 = | · |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | + \$ 18 | | | OR | + \$ 360 = | |
| | | ٠ | | | | TOTAL A | DDIT. | | OR | TOTAL ADDIT. FFF | |
| | | (Column 1) | | (Column 2 |) (Column 3) | | | ÷ | | | j |
| 2 F | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSL PAID FOR | PRESENT Y EXTRA | RATE | | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | = | X \$ 25 | = | | oR | X \$ 50 = | |
| | Independent | * | Minus | *** | = | X \$ 100 |) = | | OR | X \$ 200 = | |
| AME | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | - | | |
| AME | FIRST PRESE | ENTATION OF M | IULTIPLE DEP | EMDEM! ČEVII | v' [_] ·] | + \$ 180 |) = | - 1 | OR | + \$ 360 = | 1 |

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.